FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	(See instructions)		Office use only
NAME OF COMMITTEE (in formal committee)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5
Friends of Joe	Pitts		
ADDRESS (number and s	treet) PO BOX 775		
(Check if addre			10275 L
	Unionville		PA
COMMITTEE'S E MAN	ADDDECC	CITY▲	STATE▲ ZIP CODE ▲
FOJP@comcas			
COMMITTEE'S WEB F	PAGE ADDRESS (URL)		
		1 1 1 1 1 1 1 1 1 1	
COMMITTEE'S FAX N 610-444-2263	UMBER		
2. DATE 0.3	/ 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
3. FEC IDENTIFICAT	TION NUMBER	C C00310136	
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A)	
I certify that I have examin	ned this Statement and to the best of my kno	owledge and belief it is true, correct a	nd complete
Type or Print Name of 1	Treasurer Jerri-Lynn Wier		
Signature of Treasurer	Electronically Filed by <b>Jerri-Lynn</b>	n Wier	Date 03 / D 31 / Y Y Y Y Y Y Y
NOTE: Submission of fals	se, erroneous, or incomplete information ma	y subject the person signing this Stat	•
Office Use Only FE3AN042.PDF		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100	